

McCarroll, Myrtle

From: Carson, Ian
Sent: 18 March 2004 01:06
To: O'Brien, Anne
Subject: FW: Sperrin Lakeland PRESS STATEMENTS

Anne,

Got your email on Monday, we had a Medical Branch 'away day' yesterday, hence the deserted office! You may be interested in the more recent of these 2 press releases from Sperrin Lakeland. If Hugh Mills still hasn't made contact, you may wish to give Brigit an 'informal phonecall' just to let her know that CMO and I have discussed the situation with you. I think that this most recent press release may have been precipitated by a TV programme which is due to go out on Thursday evening regarding these hyponatraemia deaths. CMO is to be interviewed tomorrow.

Yours, Ian

-----Original Message-----

From: Mulhern, Kevin
Sent: 16 March 2004 09:39
To: Campbell, Dr Henrietta; Carson, Ian; McCarthy, Miriam
Subject: Sperrin Lakeland PRESS STATEMENTS

-----Original Message-----

From: Kerr Sharon [mailto:SKerr [REDACTED]]
Sent: 16 March 2004 09:24
To: Kevin Mulhern
Subject: PRESS STATEMENTS

This message is bound by the disclaimer below.

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Kevin

See attached press statements from Bridget O'Rawe as discussed.

Thanks.

Sharon Kerr
Communications Support Officer
Developing Better Services Project Team
Sperrin Lakeland Trust

-----Original Message-----

From: Hall Janet
Sent: 16 March 2004 09:20
To: Kerr Sharon
Subject:

Janet Hall
Communications/public affairs manager
Sperrin Lakeland Trust
Trust Headquarters
Tyrone and Fermanagh Hospital
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DHSSPS

075-059-193

03/02/2005

[/w.sperrin-lakeland.org](http://w.sperrin-lakeland.org)

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INQUEST – LUCY CRAWFORD: **TRUST PROVIDES INFORMATION** **ON CHANGES TO PRACTICE**

Further to the information provided in the press release immediately following the Inquest in respect of Lucy Crawford, Sperrin Lakeland Health and Social Care Trust has advised on the changes to practice introduced at the Erne Hospital since April 2000.

These changes in practice occurred in respect of documentation, patient observation, weighing infants and administration of intravenous (IV) fluids. The changes include:

Documentation

- Nursing staff have received updated training on records and record keeping.
- Nursing records are subject to audit.
- Commenced a programme for the appointment of clinical pharmacists to improve prescribing and recording of medicines.

Observations

- Emergency Admissions Policy is now in place, which specifies minimal observation standards within the first 24 hours of admission and that the type of observation required is detailed.

Weighing

- Young children's weights are now double checked by a second person.

Fluids

- Solution 18 is not used as the first treatment.
- Department of Health wall chart 'Risk of Hyponatraemia' is prominently displayed in treatment rooms where IV fluids are erected.
- Children on IV fluids have electrolytes assessed 4-6 hourly as necessary.
- Medical casenotes include a section for fluid replacement calculations before any child is commenced on IV fluids.

The above changes have been led by medical and nursing staff supported by managers at the Erne Hospital.

The Trust is assessing the implications arising from the Inquest. These will be considered with medical and nursing staff and discussed with legal representatives. Furthermore, arrangements are being established to consider key learning points with the Chief medical Officer, Western Health and Social Services Board and members of the Western Health and Social Services Council. The Trust would wish to ensure that any further lessons from this tragedy are shared with the wider HPSS at an early opportunity.

... ENDS

Further enquiries should be directed to:

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PR555 / 24 February 2004



STATEMENT FROM SPERRIN LAKELAND HEALTH AND SOCIAL CARE TRUST

This is undoubtedly a tragedy for the Crawford family – nobody can underestimate the grief experienced from the loss of a child. As an organisation dedicated to caring for people, we regret our part in this tragedy.

Practice today at the Erne Hospital is different from the time of Lucy's death in April 2000 almost four years ago. These practice changes occurred following the Coroner highlighting the death in June 2001 of Rachel Ferguson. The Trust adopted new procedures on fluid replacement in 2001, ahead of the guidelines issued by Dr Etta Campbell, Chief Medical Officer, in 2002 and staff have been trained in these practices.

The Trust will be carefully reflecting on the conclusions of the Coroner and ensure that our Trust and others learn the lessons of this tragic case.

... ENDS

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PR554 / 19 February 2004

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